

IN THE CLAIMS

Please cancel claims 1-3 and 6-8 without prejudice or disclaimer.

Please amend claim 5 as indicated below.

This listing of claims will replace all prior versions, and listings, of claims in the application.

Listing of Claims:

Claims 1-3 (cancelled)

Claim 4 (previously presented) A surgical instrument for treating female urinary stress incontinence comprising:

- a) a sling contoured to the anatomical configuration of the mid-urethra, proximal urethra, and base of the bladder for implanting into the lower abdomen of a female; the sling providing support to mid-urethral and bladder neck sphincteric continence sites as well as support for the base of the bladder, said sling defining in part a tissue remodeling portion fixedly attached to and surrounding a mesh section; and
- b) a sling transfer instrument having a distal end and a proximal end, said instrument defining in part a progressively curved shaft portion positioned between distal and proximal ends with an attached insertion handle located at its proximal end, and a means for attaching said sling to the distal end of said shaft;

wherein the mesh section is comprised of absorbable polymers, and filaments of the mesh section have a diameter of approximately .012 inch to 0.1 inch.

Claim 5 (currently amended) ~~The surgical instrument of claim 1~~ A surgical instrument for treating female urinary stress incontinence comprising:

- a) a sling contoured to the anatomical configuration of the mid-urethra, proximal urethra, and base of the bladder for implanting into the lower abdomen of a female; the sling providing support to mid-urethral and bladder neck sphincteric continence sites as well as support for the base of the bladder, said sling defining in

part a tissue remodeling portion fixedly attached to and surrounding a mesh section;
and

b) a sling transfer instrument having a distal end and a proximal end, said instrument defining in part a progressively curved shaft portion positioned between distal and proximal ends with an attached insertion handle located at its proximal end, and a means for attaching said sling to the distal end of said shaft;

wherein the mesh section is approximately 60 cm in length, approximately 1.5 cm to 3.0 cm at its widest and generally center-most position, and approximately 1.0 cm wide at each of its opposite ends.

Claims 6-8 (cancelled)

Claim 9 (withdrawn) A surgical instrument for treating female urinary stress incontinence comprising:

a) a sling contoured to the anatomical configuration of the mid-urethra, proximal urethra, bladder neck and base of the bladder for implanting into the abdomen of a female providing support to mid-urethral and bladder neck sphincteric continence sites as well as support for the base of the bladder to restore the normal anatomical relationship of the urethra to the bladder, said sling defining in part a mesh section fixedly attached to and surrounding a tissue remodeling portion; and

b) a sling transfer instrument having a distal end and a proximal end, said instrument defining in part a progressively curved shaft portion positioned between distal and proximal ends with a first detachable handle located at its proximal end, a second attachable handle positioned said shaft's distal end, and a means for attaching said sling to the proximal end of said shaft.

Claim 10 (withdrawn) The sling transfer instrument of claim 9 wherein said first handle further comprises a digit control accommodation, said digit accommodation dimensioned approximately 2.5 to 4.5 cm length and 1.0 to 4.0 cm in width and approximately 1.5 cm in depth.

Claim 11 (withdrawn) The mesh sling of claim 9 wherein said mesh portion is comprised of non-absorbable polymers and filaments of said mesh have a diameter from about .002 inch to about .08 inch.

Claim 12 (withdrawn) The mesh sling of claim 9 wherein said mesh portion is comprised of absorbable polymers and filaments of said mesh have a diameter from about .012 inch to about 0.1 inch.

Claim 13 (withdrawn) The mesh sling of claim 9 wherein said mesh center portion is approximately 4.0 cm in length, approximately 2.5 cm at its widest and generally center most position and approximately 1.0 cm wide at each of its opposite ends.

Claim 14 (withdrawn) The transfer instrument of claim 9 wherein said progressively curved shaft portion has a diameter from about 3.5 mm to about 4.0 mm and a progressive curve with a maximum radius of approximately 5.1 cm.

Claim 15 (withdrawn) The transfer instrument of claim 9 wherein said tip proximal end of said shaft portion is oriented in a direction opposite that of said shaft's curved portion, said proximal end of said shaft 1.0 cm in length and approximately 4.0 mm in width at an end opposite that end attached to said shaft position.

Claim 16 (withdrawn) The transfer instrument of claim 9 wherein said progressively curved shaft portion has a diameter from about 3 mm to about 4.5 mm and a progressive curve with a maximum radius of approximately 4 cm.

Claim 17 (withdrawn) The transfer instrument of claim 9 wherein the progressively curved shaft is further comprised of a luminous coating.

Claim 18 (previously presented) A suprapubic method for treating female urinary stress incontinence comprising:

a) providing a sling defining in part a tissue remodeling portion and a mesh section, the sling contoured to the anatomical configuration of the mid-urethra, proximal urethra, and base of the bladder;

- b) providing a first sling transfer instrument having a distal end and a proximal end with a progressively curved shaft portion, the progressively curved shaft portion positioned between the distal and proximal ends and having an insertion handle located at the instrument's proximal end;
- c) positioning the insertion handle of the first sling transfer instrument within the human hand and utilizing the insertion handle to guide a curved tip at the instrument's distal end through the abdominal wall and through the retropubic space, allowing the tip of the instrument to be in contact with the posterior surface of the pubic bone as it traverses the retropubic space and continues into the vagina;
- d) providing a second sling transfer instrument and repeating step (c) using the second sling transfer instrument;
- e) performing cystoscopy when the curved tip of the first sling transfer instrument and the curved tip of the second sling transfer instrument are positioned within the vagina;
- f) attaching the sling to the distal end of the first sling transfer instrument and the distal end of the second sling transfer instrument;
- g) withdrawing or otherwise positioning the distal end of the first sling transfer instrument and the distal end of the second sling transfer instrument to cause the attached sling to form a U-shape around mid-urethral and bladder neck sphincter continence sites; and
- h) displacing the sling from the first and second sling transfer instruments.

Claim 19 (original) The method of claim 18 further comprising the adjusting of sling tension via a sling tension measurement component.

Claim 20 (withdrawn) A transvaginal deployment method for treating female urinary stress incontinence comprising:

- a) providing a sling defining in part a tissue remodeling portion and a mesh section and contoured to the anatomical configuration of the mid-urethra, proximal urethra and base of the bladder;

b) providing a sling transfer instrument having a distal end and a proximal end with a progressively curved shaft portion positioned between said distal and proximal ends with a detachable insertion handle located at the instrument's proximal end;

c) positioning the sling transfer instrument's detachable insertion handle within the human hand and using said handle to guide the curved tip at the instrument's distal end through the vaginal wall, behind the pubic bone, through the abdominal wall and exiting the abdominal wall below the pubic hair line;

d) disengaging the detachable insertion handle located at the instrument's proximal end from the progressively curved portion of sling transfer tool;

e) attaching a sling transfer handle to the exited curved tip;

f) attaching the sling of step (a) to the sling transfer instrument's proximal end;

g) positioning the sling transfer instrument's sling transfer handle within the human hand and using said handle to retrieve or otherwise pull the sling attached to the instrument's proximal end through the vaginal wall, behind the pubic bone, through the tissues of the abdomen traversing perforations made in the vaginal wall and abdominal wall previously in step (c);

h) providing a second sling transfer instrument and repeating steps (c) through (g) on a side of the body to cause the sling to be positioned to form a U-shape around mid-urethral and bladder neck sphincteric continence sites;

i) displacing said sling from the sling transfer instrument subsequent to said sling's passage through the abdominal wall.

Claim 21 (withdrawn) The method of claim 20 further comprising the adjusting of sling tension via a spring loaded tension measurement component.